Combined Declaration For Patent Application and Power of Attorney								ATTORNEY DOCKET 84027WFN		
As below named inver	ntor, I hereby decl	are that						-		
My residence, post office address I believe I am the original, first below) of the subject matter which	and sole inventor	(if only one na	me is lis	ted below) or an origina		oint inve	ntor (if plur	al names	are listed	
RANDOM ARRAY O ENZYME DIGESTIC		-SPHERE	S FO	R THE ANALY	SIS OF N	NUCI	EIC AC	CID U	SING	
The energification of which (cheel	k anly ana itam ba	Jour):								
The specification of which (check X) is attached hereto.	k only one item be	:10W):								
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was filed as United State was amended on (if app	• •	enarivo on an	ia							
was filed as PCT interna	ational application	n Number on a	and was	amended on (if applica	able)					
I hereby state that I have reviewe	d and understand	the contents of the	he above	-identified specification,	including the	claims,	as amended	by any ar	nendment	
referred to above. I acknowledge the duty to disclo	se to the U.S. Pate	ent & Trademark	Office	all information known to	me to be mat	terial to	natentability	as define	ed in Title	
37, Code of Federal Regulations,		110001111111					£			
I hereby claim foreign priority b certificate, or (365 (a) of any PC'		•					` ' '	•		
and have also identified below a			_	-						
one country other than the United	d States of Americ	a filed by me on	the sam	e subject matter having a	filing date b	efore the	at of the appl	ication(s)) of which	
priority is claimed: PRIOR FOREIGN/PCT APPL	ICATION(S) AN	D ANY PRIOR	ITY CL	AIMS UNDER 35 U.S.C	:. 119:				, 	
COINTRY (I PCT indicate PCT)	As	PLICATION NUMBER		DATE OF FILING			PRIORITY CLAIMED I	INDER 35 USC	§119	
(#PCF indicate PCI)				(поличоруува)			YES		NO	
Á							YES		NO	
			i				YES		NO	
hereby claim the benefit under	Title 35, United S	tates Code, 119	§(e) of a	ny United States provisio	nal applicatio	n(s) liste	ed below:			
PRIOR PROVISIONAL APPL	ICATION(S) AN	D ANY PRIOR	ITY CL	AIMS UNDER 35 U.S.C	C. §119 (e):					
PROVISIONAL A	PPLICATION NUMBER				FILING DATE (mo	nthyday/year)				
			L					·		
I hereby claim the benefit under ' the United States of America that prior applications(s) in the mann Office all information known to between the filing date of the prior	t is/are listed below her provided by the me to be materia	w and, insofar as e first paragraph al to patentabilit	the subj of Title ty as def	ect matter of each of the 35, §112, I acknowledge ined in Title 37, Code o	claims of this the duty to of f Federal Res	applica lisclose gulation:	tion is not d to the U.S.	isclosed i Patent &	n that/thos Trademark	
PRIOR US APPLICATIONS (35USC§120:	OR PCT INTERN	IATIONAL API	PLICAT	IONS DESIGNATING	THE U.S FO	R BEN	EFIT UNDE	R		
	US APPL	CATIONS				ST	ATUS (Check o	ne)		
U.S APPLICATION NUM	BER		USFIL	ING DATE	PATENTE	ĒD	PENDING	ABA	NDONED	
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PCT APPLICATION NO PCT FILE		NG DATE		J S SERIAL NUMBERS ASSIGNED (if any)						
			 							
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	POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or											
agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute												
this application and transact all business in the Patent and Trademark Office connected												
therewith.												
Send Correspondence to: Direct Telephone Calls to:												
56	end Corresp		Legal St	aff		Direct Telephone Calls to: (name and telephone number)						
Patent Legal St Eastman Kodak												
343 State Street					í	William F. Noval						
Rochester, NY				14650-2201	' '	(585) 477-5272						
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3	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company		CITY 4 Science Park West, New Ha	STATE & ZIP COD	STATE & ZIP CODE (COUNTRY) Connecticut 06511						
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME						
0	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CIT	COUNTRY OF CITIZENSHIP						
4	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP COD	STATE & ZIP CODE (COUNTRY)						
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN N	SECOND GIVEN NAME						
0	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CIT	COUNTRY OF CITIZENSHIP						
5	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP COD	STATE & ZIP CODE (COUNTRY)						
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN N	SECOND GIVEN NAME						
0	RESIDENCE & . CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CITI	COUNTRY OF CITIZENSHIP						
6	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP CODE	STATE & ZIP CODE (COUNTRY)						
I he	ereby declare	that all statements made herein o	f my own kr	nowledge are true and that all statemen	ts made on information	and helief are helieved to he						
imp	, and further	that these statements were mad	te with the	knowledge that willful false statemen willful false statements may jeopardize	ts and the like so made	a are runichable by fine a						
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DATE		DATE		DATE								
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